

becoming necessary for state and local health authorities to step in, both to give emergency medical care and to prevent the spread of infectious diseases. The extent of the economic phases will be better understood, after perusal of the rising relief costs in one county of the state, that of Los Angeles.

* * *

Responsibilities of Respective County Medical Societies.—In counties in which these "migratory camps" come into being during different periods of each year, the component medical societies may serve their respective communities in good wise, through the appointment of special committees to make surveys and reports on how best to bring about efficient coöperation with local public health agencies and other officials.

* * *

Federal Coöperation Is Also Indicated.—Here, also, we deal with not an intrastate, but rather an interstate problem; wherefore, in good time, federal coöperation and support must likewise be forthcoming. Some of the press clippings take up this phase of the problem.

"GOVERNMENT MEDICINE"

"Los Angeles Times" Prints a Sound Editorial on Senator Lewis' American Medical Association Address at Atlantic City.—The address of Senator James Hamilton Lewis of Illinois, made at the Atlantic City meeting of the American Medical Association and printed in the *Journal of the American Medical Association* proceedings of the House of Delegates, has become the basis of much comment, particularly so because of the vagueness of some of the Senator's statements.

From later accounts, it would appear that Senator Lewis spoke, not in the name of President Roosevelt, but as a "friend of both the Federal Administration and the Medical Profession." For his kindly advice, physicians should be appreciative, even though they fail to accept many of his premises and conclusions. His remarks were discussed in both the medical journals and the press in general; and an editorial, with the caption, "Government Medicine" (reprinted on page 141, in this number), which appeared in a recent issue of the *Los Angeles Times*, is given place because it brings out some very sensible points. Its perusal, consequently, is commended to our readers.

NEW PUBLIC HEALTH LAWS

New Laws Become Operative on August 27, 1937.—On August 27, the statutes approved by the Legislature and signed by Governor Merriam become laws. In previous issues comment was made on proposed laws. Some of these failed to receive legislative approval, others were given "pocket" or direct vetoes by the governor, or signed by him, these last to find places on the statute books.

Many members of the Association, during the recent legislative session, gave much appreciated aid when called upon by the California Medical Association Committee on Public Policy and Legislation; and for them and other readers the comments which follow are hereby presented.

* * *

Laws Relating to the Medical Practice Act.—From the report of the Law and Education Committee of the California Board of Medical Examiners, Charles E. Schoff, M. D., chairman, we quote:

On June 24, 1937, the records of the Secretary of State's Office show the following bills, in which the Board of Medical Examiners has been interested during the last legislative session, to have been signed by the Governor and chaptered:

Senate Bill 133 (Code bill—companion to Assembly Bill 880); signed June 17, 1937. Now Chapter 414, Statutes 1937.

Senate Bill 252—Provided funds for a building for this department in Sacramento; signed May 12, 1937. Now Chapter 288, Statutes 1937.

Assembly Bill 880 (Code bill—companion bill to Senate Bill 133); signed June 16, 1937. Now Chapter 399, Statutes 1937.

Assembly Bill 1005—Added Section 581 to the Business and Professions Code re diploma mill; signed June 17, 1937. Now Chapter 446, Statutes 1937.

* * *

Assembly Bill 1004 (Received Pocket Veto)—Proposed to amend Section 2380 of the Business and Professions Code, prohibiting "the actual practicing of any system or mode of treating the sick or afflicted which is intended or has a tendency to deceive."

Assembly Bill 1253 (Received Pocket Veto)—Among other provisions prohibited dispensing, prescribing or selling of dinitrophenol for therapeutic purposes.

Senate Bill 782 (Received Pocket Veto)—Added the following sections to the Business and Professions Code: (a) required appellant to pay cost of appeal, (b) included under the heading of "unprofessional conduct" the "fraudulent representation by advertisement or otherwise that a manifestly incurable condition of sickness, disease, deformity, ailment, or injury of any person can be cured. . .," (c) knowingly making or signing any false certificate while acting in a professional capacity, or while acting within the scope of practice permitted by the certificate issued.

Senate Bill 783 (Received Pocket Veto)—Amended Section 2436 of the Business and Professions Code providing for injunction.

Senate Bill 1139 (Received Pocket Veto)—Amended the so-called college incorporation bill passed in 1927 (Chapter 152, Statutes 1927).

* * *

California State Board of Public Health.—A résumé of legislation relative to public health enacted by the Legislature of 1937, and receiving the Governor's approval, includes the following:

Assembly Bill 2790, now known as Chapter 787, Statutes of 1937.

This Act provides for the establishment in the State Department of Public Health of a Bureau of Venereal Diseases whose function it shall be to "coöperate for the prevention, control, and cure of venereal diseases with physicians and surgeons, medical schools, public and private hospitals, dispensaries, clinics, public, and private schools, colleges, normal schools, university authorities; federal, state, local, and district health officers and Boards of Health and all other authorities; institutions caring for the insane; and with any other person, institutions or agencies."

It gives the State Board of Public Health power to " . . . make and promulgate such rules and regulations as

are reasonably necessary to effect the control of venereal disease . . . and such rules and regulations as are reasonably necessary to control and effectuate a proper reporting, quarantine, examination of, and proper control measures for such diseases." It further provides that "it shall be incumbent upon a State agency conducting a public hospital to admit acute venereal disease cases when, in the opinion of the State Department of Public Health or the local health officer having jurisdiction, such person infected with venereal disease may be a menace to public health."

To provide for the enforcement and support of the provisions of this Act the sum of \$150,000 was appropriated for the eighty-ninth and ninetieth fiscal years.

Assembly Bill 1721.

This Act provides that the sale and distribution of prophylactics shall be under regulation of the State Board of Pharmacy. It provides for the licensing of wholesalers and retailers. It provides standards for definite types of prophylactics, and further provides that all prophylactics must bear the manufacturer's name, address, and trademark. The Act further makes it unlawful to publicly advertise the sale or uses of prophylactics on "placards, billboards, hand bills, newspapers, periodicals, or other printed matter, or by radio"; but does not prohibit the advertising in medical or drug publications.

Assembly Bill 1132.

Adds Chapter 11a—Section 11491 to 11519 to Part 2 of the Insurance Code—and repeals Chapter 386 of the Statutes of 1935.

1. Applies only to nonprofit hospitals, and nonprofit hospital services.

2. Hospitals shall incorporate under provisions of this Chapter and Division One, Part IV, Title XII of the Civil Code.

3. At least two-thirds of the Board of Directors shall be representatives of the hospital with whom the hospital service has contracts and licensed physicians.

4. All hospitals with whom a hospital service contracts in the State of California must be licensed by the State Department of Public Health.

5. The State Department of Public Health shall inspect all hospitals before issuing a certificate.

6. The fee for inspection and a certificate of approval shall be not more than 25 cents per bed, but not less than \$15 per hospital.

7. The State Department of Public Health shall have the power to enforce the provisions of this Act and regulate and enforce the hospital standards of this Act.

8. The State Department of Public Health may hold hearings on complaints against any licensed hospital. The certificate of approval may be revoked. In such case the department shall notify the Commissioner of Insurance. He then shall revoke the certificate of authority of the hospital.

9. The Commissioner of Insurance shall not issue a certificate of authority to any nonprofit hospital service unless:

- (a) The hospitals contracted with have certificates of approval from the State Department of Public Health.
- (b) The contract with subscribers is free of fraud.
- (c) That no profit can be made from contracts, fees, etc.

Senate Bill 118.

1. Licenses may be issued—

(a) Technologists—

1. By examination.

2. All those engaged in direction of a laboratory for a period of five years prior to this Act.

(b) Technicians—

1. By examination.

(a) All sciences.

(b) One science only.

2. Any person who, for three years during past five years has been engaged in performing clinical laboratory tests in California.

2. Laboratory supervised by a licensed technologist or M. D.

3. All technicians must be licensed by State Board of Public Health.

4. Apprentices in laboratories are allowable.

5. Persons employable—

(a) Licensed technologists and technicians only employable after January 1, 1938.

(b) Apprentices can be employed only in a laboratory in which there are licensed technicians.

(c) Unlawful for more than two apprentices to be employed in one laboratory.

6. Laboratories in nonprofit hospitals, State hospitals, or United States hospitals exempt.

7. Fees—

(a) License fee of not exceeding \$10 for each technologist and not to exceed \$5 for each technician.

(b) Finances reportable monthly by Board to State Controller and biennially to Governor.

8. State Board may make rules and regulations for enforcement of Act.

Concerning the above discussed Senate Bill 118, the following report may also be of interest:

COPY

June 17, 1937.

Report on Senate Bill No. 118—Parkman:

Subject: New act, licensing clinical laboratory technologists and technicians, and regulating the conduct of clinical laboratories.

Form: Approved.

Constitutionality: Approved.

Analysis:

This act is substantially the same as Deering Act 4814a, Chapter 638 of the Statutes of 1935. This 1935 Act was held unconstitutional by the Attorney General, and the bill repeals this 1935 enactment and provides another statute without the unconstitutional feature.

The bill declares that it is unlawful, after January 1, 1938, for any person to conduct a clinical laboratory or to perform tests in such laboratory unless he is licensed as a clinical laboratory technologist or as a clinical technician or as a physician and surgeon. (Secs. 1 and 5.)

The State Board of Public Health is to issue certificates to qualified technologists and technicians after examination to ascertain their fitness to practice. Technologists who have practiced five years, and technicians who have practiced three years may be licensed without examination if they file their application prior to January 1, 1938. (Secs. 4 and 5.)

The bill exempts clinical laboratories operated by nonprofit hospitals, and by nonprofit hospitals which are maintained by employers for their employees and their dependents. It also exempts clinical laboratories operated by the State or Federal Government, and those operated by nonprofit foundations engaged in research work. (Sec. 6.) The bill does not require physicians and surgeons to be licensed in order to conduct a laboratory or to perform tests. (Sec. 4.)

A fee of not to exceed \$10 is provided for the original application and the annual renewal of a technologist's license, and a fee of not to exceed \$5 is provided for the original application for a technician's license, and of not exceeding \$1 for the annual renewal of a technician's license. All money collected is deposited in a special fund and appropriated for meeting the costs of enforcing the act. (Sec. 8.) FRED B. WOOD, *Legislative Counsel*.

Senate Bill No. 425 now known as Chapter 758, Statutes of 1937.

This is "An act to license, regulate and control the manufacture, transportation, sale, purchase, possession, and disposition of alcoholic beverages; to levy an excise tax on the sale of alcoholic beverages; to provide for the licensing of the manufacture, distribution and sale of alcoholic beverages; to prescribe penalties for the violation of this act;

to promote temperance in the use of alcoholic beverages; to adopt and enforce unfair trade practice regulations and price-fixing provisions regulating the sale of alcoholic beverages; to take effect immediately."

In section 37, item 3 of this Act, the sum of \$60,000 is appropriated "... to be used by the State Department of Public Health for enforcement work directed toward preventing the manufacture, sale, or transportation of adulterated, misbranded, or mislabeled alcoholic beverages."

This Act allows the Bureau of Pure Food and Drug Inspection to continue the work of enforcement of the regulations of the 1935 Act on manufacture, sale, or transportation of adulterated or misbranded alcoholic beverages.

‘ ‘ ‘

Assembly Bill 116, Chapter 769, Statutes of 1937.

This bill appropriates the sum of \$50,000 to be expended by the State Department of Public Health for the enforcement of standards, quality and identity in the manufacture and sale of California wines and brandies.

‘ ‘ ‘

Assembly Bill 2058, now known as Chapter 777, Statutes of 1937.

This Act amends Section 1144 of the Agricultural Code pertaining to the regulation by the State Department of Public Health of eggs shipped into the State of California from other states or from another country.

It provides:

1. That a statement be sent the Department of Public Health as to the quality, kind, and containers of egg products shipped into the United States.

2. That a statement showing the person or firm to whom such egg products are sold be furnished the State Department.

It further provides that cold storage warehouses furnish the department at the end of each month a statement of all foreign imported eggs received during the month, with the name of the depositor, the quantity of such egg products, and the containers used. Further, that such foreign imported egg products shall be inspected by the department before removal. An appropriation of \$2,400 was made to the department for the enforcement of this act.

TWO INTERESTING DECISIONS OF THE A. M. A. JUDICIAL COUNCIL BEARING ON APPEALS AGAINST DISCIPLINARY ACTION IN CALIFORNIA

Appeal from Disciplinary Action of Two Component County Societies.—Del Monte Session minutes* make brief reference to disciplinary action by two component county societies of the California Medical Association taken against certain respective members; the members so adjudged refusing to accept the verdicts, and presenting appeals, first to the Council of the California Medical Association for reversal of county society action and, when not granted by the State Council, then to the Judicial Council of the American Medical Association for reversal of judgment or a rehearing.

Space does not permit the printing of the full decisions of the American Medical Association Judicial Council in the matter of these appeals, but it may be of interest to members to peruse excerpts on some of the general principles involved, as handed down by this national committee. The particular decisions in question, as given by the American Medical Association Judicial Council and transmitted to the California Medical Associ-

ation under date of April 24, refer to disciplinary procedures previously considered by the Council of the California Medical Association in connection with actions taken by the San Francisco and Kern County Medical Societies.†

* * *

Excerpts from the Decision of the Judicial Council of the American Medical Association in the San Francisco Cases.—From the decision rendered in the San Francisco cases, we quote:

The appellants in this case were charged with a violation of certain sections of the Principles of Professional Conduct of the San Francisco County Medical Society, were found guilty and sentenced to various degrees of punishment. Appeal was taken to the Council of the California Medical Association. Before the appeal was heard certain of the group asked for a rehearing before the county society Board of Directors, which was granted and held, but none of the appellants appeared. At the rehearing, guilt was reaffirmed, but certain sentences previously meted were modified. . . .

‘ ‘ ‘

The appellants came before the Judicial Council asking a reversal of the decision of the Council of the California Medical Association on the following grounds. . . .

‘ ‘ ‘

... There was a voluminous mass of exhibits and testimony presented at the hearing before the Judicial Council. Exhaustive briefs were submitted and there was every evidence of thorough and aggressive preparation by astute legal minds on both sides. Every advantage was taken of technicalities and of errors of procedure. In analyzing and studying the material and the arguments the Council [American Medical Association Judicial Council] has had as its objective the determination as to whether or not the interpretation of ethical matters has been correct and whether or not the appellants have had a fair trial. . . .

‘ ‘ ‘

... The Judicial Council [American Medical Association Judicial Council], after a thorough consideration of the general conditions of professional practice in San Francisco County as exhibited by the records, is of the opinion that the trial was as fair as could be had under the provisions of the constitution and by-laws of the County Society. It believes that, in fact, there was no discrimination or unfairness warranting a reversal of the action of the State Council. . . .

‘ ‘ ‘

... The Council [American Medical Association Judicial Council] is not concerned with fine legal technicalities. Its function is to see that substantial justice to both parties in a controversy is done to one no less than the other. In the present instance the appellants were convicted of conduct stated to be unethical under the Principles of Medical Ethics, and their conviction was upheld by the Council of the California Medical Association. The Judicial Council expresses no opinion as to guilt or innocence, but guilt having been declared, the Council considers it a minor technicality as to whether the charges were brought under a county rule of conduct or under the American Medical Association's Principles of Ethics.

... In respect to the third contention of the appellants, that there was not sufficient evidence to show any violation of the Principles of Conduct of the San Francisco County Medical Society by the appellants or any of the accused, the Judicial Council is not in agreement with the sophisticated reasoning upholding the contention. As the guilt or innocence of the charge is the province of the county and state bodies, the Judicial Council [American Medical As-

† See Council minutes as follows:

Volume 44, No. 2, February, 1936, pages 121 and 122; Volume 44, No. 5, May, 1936, pages 438 and 439; Volume 45, No. 1, July, 1936, pages 96 and 97; Volume 45, No. 5, November, 1936, page 431.

* See June, 1937, issue, CALIFORNIA AND WESTERN MEDICINE; for House of Delegates minutes, page 411; and for Council minutes, items 5 and 14, page 424.